										A	oplication	or Do	ocket Number	
PATENT APPLICATION FEE DETERMINATION RECOR Effective December 29, 1999											09	61	183	00
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMAI TYP		ENTITY	OR	OTHER SMALL	
FOR			NUMBER FILED			NUMBER EXTRA			RATI	E	FEE	[RATE	FEE
BASIC FEE									A STATE		345.00	OR		690.00
TOTAL CLAIMS			minus 20=			•			X\$ 9=			OR	X\$18=	
INDEPENDENT CLAIMS			minus 3 =			•			X39=			OR	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT								Ì	+130=			OR	+260=	
* If the difference in column 1 is less than zero, enter "0" in column 2/										•		וייו		601
••			•		TOTA	\L		OR	TOTAL	67 0				
(Column 1) (Column 2) (Column 3)									SMALL ENTITY			OR	OTHER SMALL	
AMENDMENT A		CL REM Al	AIMS AINING FTER IDMENT			HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATI		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*		Minus	**		=		X\$ 9	=		OR	X\$18=	
	Independent	*		Minus	***		=	Ī	X39=			OR	X78=	
_	FIRST PRESE	NTATIO	ON OF MU	JLTIPLE DEF	PENE	DENT CLAIM		t	+130	_		OR	+260=	
	,		**	•				L	TO:				TOTAL	
								A	ADDIT. F			OR	ADDIT. FEE	
AMENDMENT B			umn 1) AIMS	**************************************		Column 2) HIGHEST	(Column 3)	Г			ADDI-	}		ADDI-
		Al	IAINING FTER NDMENT		PF	NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATI	=	TIONAL FEE		RATE	TIONAL FEE
	Total	*		Minus	**		=		X\$ 9	1)		OR	X\$18=	
	Independent	•		Minus	***		=	ľ	X39=	<u>.</u>		OR	X78=	
_	FIRST PRESE	NTATIO	ON OF MULTIPLE DEP			ENDENT CLAIM			400				.000	**
	:							L	+130			OR	+260= TOTAL	
								A	TO1 NDDIT. F			OR	ADDIT. FEE	٠.,.
			umn 1)			Column 2)	(Column 3)							. •
AMENDMENT C		REM Af	AIMS AINING TER IDMENT		PF	HIGHEST NUMBER REVIOUSLY PAID FOR	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•		Minus	**		=		X\$ 9:			OR	X\$18=	
	Independent	•		Minus	**1	•	=	ŀ	X39=				X78=	
⋖	FIRST PRESE	NTATIO	ON OF MU	JLTIPLE DEI	PEN	DENT CLAIM		ŀ	703-			OR	<u> </u>	
			+130	=		OR	+260=							
**	f the entry in colur f the "Highest Nur If the "Highest Nu The "High st Num	mber Pr mber Pr	eviously Pa eviously Pa	aid For IN THI aid For IN THI	S SP	ACE is less tha ACE is less tha	n 20, enter "20." In 3, enter "3."		TO1 NDDIT. F nd in th	EE	propriate bo	OR	TOTAL ADDIT. FEE lumn 1.	